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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB Number: 3235-0076 Expires: July 31, 2008 Estimated average burden hours per response. 16.00

OMB APPROVAL

NOTICE OF SALE OF SECURITIES	
PURSUANT TO REGULATION D,	
SECTION 4(6), AND/OR	
IFORM LIMITED OFFERING EXEMPTION	I

S	EC USE	ONL	Y
Prefix			Serial
	l		
DA	TE REC	EIVI	ED

Name of Offering (check if this is an am	endment and name has change	ed, and indicate cha	ange.)
OFFERING SHARES OF COMMON STO	CK and WARRANTS	,	248
Filing Under (Check box(es) that apply:)	☐ Rule 504 ☐ Rule 50	5 ⊠Rule 506	Section 46 ocessitti OE
			MEILALocessura
Type of Filing: □ New Filing ⊠Amen	dment		Section
	A. BASIC IDENTIFI	CATION DATA	0.0.000
1. Enter the information requested about the	e issuer		<u>.nn 2 9 2008</u>
Name of Issuer (check if this is an amend	dment and name has changed.	and indicate chang	ze.)
		_	_
ACM FINANCIAL TRUST, INC. (form	erly Atlantic Capital Manas	gement Inc.)	Washington, DC
Address of Executive Offices	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area Code)
			336-760-9331
110 Oakwood Drive, Suite 340, Winston-	Salem, NC 27103		
Address of Principal Business Operations	(Number and Street, City,	State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)		- DDA-	
Brief Description of Business		P PRUC	ESSED
Mortgage backed securities			
Type of Business Organization	limited partnership, alread	Alic a	Á0000
⊠ corporation	limited partnership, alread	ay formed rou v	4 2008 other (please specify): limited
□ business trust	☐ limited partnership, to be	iormed	liability company
	☐ limited partnership, alread ☐ limited partnership, to be Montl	¹ IM⊎MSON	V RELITEDO
A . 1 . D . 1 . 1 . 0			יייבסובולט
Actual or Estimated Date of Incorporation of	or Organization: 0 8	9 8	
Jurisdiction of Incorporation or Organizatio	n: (Enter two-letter U.S. Pos	tal Service abbrevia	ation for State:
	 CN for Canada: FN for oth 		

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee. State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a current valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

 Each general and managing partner 	r of partnership issuers.			
Check Box(es) that Apply: ☐ Promo	ter Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individua	1)			
Business or Residence Address (Numb	er and Street, City, State, 2	Zip Code)	<u>.</u>	
Check Box(es) that Apply: ☐ Promo	ter	☐ Executive Officer		☐ General and/or Managing Partner
Full Name (Last name first, if individua	1)			
Hough, Michael				
Business or Residence Address (Numb	er and Street, City, State, 2	Zip Code)		
110 Oakwood Drive, Suite 340, Wins	ton-Salem, NC 27103			
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual)		-		
Full Name (Last name first, if individua	l)			
Business or Residence Address (Numb	er and Street, City, State, 2	Zip Code)		
110 Oakwood Drive, Suite 340, Winst				
		□ Executive Officer	☑ Director	
Full Name (Last name first, if individua	1)			
Business or Residence Address (Numb	er and Street, City, State, 2	Zip Code)		
				
	·	☑ Executive Officer	☐ Director	
Full Name (Last name first, if individua	1)			
Boos, Frederick J.				
Business or Residence Address (Numb	er and Street, City, State, 2	Zip Code)		
110 Oakwood Drive, Suite 340, Winst	ton-Salem, NC 27103			

			<u></u>		B. I	NFORM <i>A</i>	TION A	BOUT OF	FERING		.			
1. H	las the	issuer so	ld, or doe		r intend to	sell, to no	n-accredit	ed investo	rs in this o				Yes ⊠	No □
2. V	What is	the mini	num inve	stment tha	will be a	ccepted fro	om any ind	lividual?	************		•••••	•••••	\$ <u>2,500</u>	! •
3. I	Does th	e offering	g permit jo	oint owner	ship of a s	ingle unit?	·	•••••				••••••	Yes □	No ⊠
s a	similar an assoc or deale	remunera ciated per er. If mo	tion for so son or agore than f	olicitation ent of a br	of purcha oker or de rsons to b	sers in con aler registe e listed ar	nection wered with t	ith sales o the SEC ar	d or given f securities nd/or with a s of such	in the off a state or s	ering. If a tates, list t	person to he name of	be listed the broke	is er
Full 1	Name (Last nam	e first, if i	ndividual)										
Busin	ness or	Residenc	e Address	(Number	and Street	, City, Star	te, Zip Co	đe)						
Name	e of As	sociated l	Broker or	Dealer										
States	s in Wh	ich Perso	n Listed	Has Solici	ted or Inte	nds to Soli	icit Purcha	isers						
(Che	ck "All	States" o	r check in	dividual S	tates)	•••••		••••••				🗆 🛮 Al	l States	
[1]	ΛT]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	
Full 1	Name (Last name	e first, if i	ndividual)										—
Busir	ness or	Residenc	e Address	(Number	and Street	, City, Sta	te, Zip Co	de)						
Name	e of As	sociated l	Broker or	Dealer										
States	s in Wh	ich Perso	n Listed	Has Solici	ted or Inte	nds to Sol	icit Purcha	sers						
(Chec	ck "All	States" o	r check in	dividual S	tates)				••••			🗆 Al	l States	
[AL]	_	AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
(IL) [MT]	_	IN] NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ]	[LA] [NM]	[ME] [NY]	[MD] [NC]	[MA] [ND]	[MI] {OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]	
[RI]	-	SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]_	[WI]	[WY]	[PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEEDS	3
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box and indicate in the columns below the amount of securities offered for exchange and already exchanged.	ge	A
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt		
	Equity	\$ <u>79,254,640</u>	\$ <u>79,254,640</u>
	□ Preferred		
	Convertible Securities (including warrants)		
	Partnership Interests		•
	Other (Specify:)		
	Total	\$ <u>79,254,640</u>	\$ <u>79,254,640</u>
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in the offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504 indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	1,	A
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	172	\$ 78,941,496
	Non-accredited Investors	15	\$ 313,144
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for a securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) month prior to the first sale of securities in this offering. Classify securities by type listed in Part C Question 1.	S	Dollar Amount
	Type of offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of th securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditur is not known, furnish an estimate and check the box to the left of the estimate.	r .	
	Transfer Agent's Fees		\$0
	Printing and Engraving Costs	⊠	\$ 1,000
	Legal Fees	⊠	\$ 50,000
	Accounting Fees		\$ 50,000
	Engineering Fees		\$ 0
	Sales Commissions (specify finders' fees separately)		\$ 0
	Other Expenses (identify)		\$ 0
	Total	전	\$ <u>101,000</u> SEC 1972 (2-99)
			DDC 1712 (2-33)

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXP	ENSES AND USE O	F PROCEI	EDS
	b. Enter the difference between the aggregate off l and total expenses furnished in response to Par the "adjusted gross proceeds to the issuer."	rt C - Question 4.a. This dif	ference is		<u>.153,640</u>
5.	Indicate below the amount of the adjusted gross p for each of the purposes shown. If the amount f and check the box to the left of the estimate. adjusted gross proceeds to the issuer set forth in research.	for any purpose is not know The total of the payments	n, furnish an estimate listed must equal the		s, & Payments to
	Salaries and fees				
	Purchase of real estate				
	Purchase, rental or leasing and installation of				— \
	Construction or leasing of plant buildings and				
	Acquisition of other businesses (including the offering that may be used in exchange for the	e value of securities involved assets or securities of anoth	d in this ner		
	issuer pursuant to a merger				
	Repayment of indebtedness				· -
	Working capital				
	Other (specify): <u>Investment in mortgage relat</u>	ted assets		\$_0	_ ⊠ \$ <u>79,153,640</u>
	Column Totals			\$ <u>0</u>	<u> </u>
	Total Payments Listed (column totals added).				≥\$ <u>79,153,640</u>
		D. FEDERAL SIGNATU	RE		
fo	he issuer has duly caused this notice to be signed by llowing signature constitutes an undertaking by the quest of its staff, the information furnished by the issuer	e issuer to furnish to the U	.S. Securities and Ex-	change Con	nmission, upon writter
	suer (Print or Type) CM Financial Trust Inc.	Signature n	N	Date 7	/15/08
	ame of Signer (Print or Type) enjamin M. Hough	Title of Signer (Print or T President	ype)		

ATTENTION _____ ATTENTION _____ Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE		···	
1.	Is any party described in 17 CFR 230.262(c), (d of such rule?			Yes □	No ⊠
	See Appo	endix, Column 5, for state response.			
2.	The undersigned issuer hereby undertakes to fi Form D (17 CFR 239.500) at such times as requ	•	te in which this notice is fik	ed, a noti	ice o
3.	The undersigned issuer hereby undertakes to f issuer to offerees.	urnish to the state administrators, upon wr	itten request, information fu	mished l	by th
4.	The undersigned issuer represents that the issue limited Offering Exemption (ULOE) of the state of this exemption has the burden of establishing	e in which this notice is filed and understa			
	e issuer has read this notification and knows the dersigned duly authorized person.	contents to be true and has duly caused the	nis notice to be signed on its	s behalf l	by th
	uer (Print or Type) CM Financial Trust, Inc.	Signature	Date 7/15/08	······································	
	me of Signer (Print or Type) njamin M. Hough	Title of Signer (Print or Type) President			_

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

					FENDIA	4			
1		2	3				Disqual	5 lification	
1	Intend	l to sell	Type of security and aggregate	•					ate ULOE, attach
	to non-a	ccredited	offering price		Type of	investor and		explan	ation of
		rs in State 3-Item 1)	offered in state (Part C-Item 1)		amount pu	rchased in State C-Item 2)		waiver	granted) -Item 1)
	(rait b		(Fait C-item 1)	Number of	<u>(ran</u>	Number of	ł	(Part E	-item 1)
State	Yes	No		Accredited Investors	Amount	Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ		ļ-							
AR									
CA									
со									
СТ									
DE	х		Common Stock	1	\$583,545				Х
DC									
FL	х		Common Stock	3	\$4,181,085				X
GA									
НІ									
ID									
IL		·							
IN									
IA									
KS									
KY									
LA									
ME									
MD	х		Common Stock	17	\$9,139,471	4	\$23,931		Х
MA									
MI									
MN									

1		2	3	<u> </u>		4			5
	to non-a	I to sell accredited as in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2) Disqualific under State (if yes, at explanation waiver gramulation waiver gramulation) (Part E-Item 2)					ate ULOE , attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MO									
MS									
MT									
NE									
NV									
NH									
NJ	X		Common Stock	1	\$242,174				X
NM		_							
NY	Х		Common Stock	2	\$1,192,735				х
NC	х		Common Stock	129	\$61,336,887	9	\$229.370		х
ND									
ОН	х		Common Stock	1	\$239,291				х
OK	_						i		
OR			, , , , , , , , , , , , , , , , , , , ,						
PA	х		Common Stock	3	\$260,521	1	\$49,616		
RI	x		Common Stock	1	\$20,918				Х
SC	X		Common Stock	3	\$115,723				Х
SD									
TN	ļ								
TX	х		Common Stock	5	\$443,076				Х
UT									1
VT									ļ
VA	Х	ļ	Common Stock	6	\$1,186,068	1	\$ 10,227		Х
					<u> </u>		<u> </u>		

1	to non-a	1 to sell accredited is in State 1-Item 1)	Type of section and aggreg offering proffered in section (Part C-Item	ate ice tate		amount pu	f investor and rchased in State C-Item 2)		Disqual under Sta (if yes explan waiver	5 ification ate ULOE , attach ation of granted) -Item 1)
State	Yes	No			Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
WA								_		
wv										
WI			<u> </u>			<u>. </u>		-		
WY			<u>-</u>			·		_		
PR										

